Table 13 North Carolina Medicaid State Fiscal Year 2002 Expenditures for the Disabled & Blind

							2002 % of	2001
		Percent of			Percent of	Total Blind		% of
		Service			Service	& Disabled	Total	Total
Type of Service	<u>Disabled</u>	<u>Dollars</u>		Blind	<u>Dollars</u>	Dollars	Dollars	Dollars
Inpatient Hospital	\$ 379,581,367	14.8%	\$	1,960,701	6.8%	\$ 381,542,068	14.7%	15.5%
Outpatient Hospital	165,736,319	6.5%		1,192,858	4.2%	166,929,177	6.4%	6.0%
Mental Hospital (> 65)	-	0.0%		7,937	0.0%	7,937	0.0%	0.0%
Psychiatric Hospital (< 21)	6,228,232	0.2%		-	0.0%	6,228,232	0.2%	0.2%
Physician	179,865,425	7.0%		1,416,988	4.9%	181,282,414	7.0%	7.3%
Clinics	196,670,592	7.7%		893,438	3.1%	197,564,029	7.6%	6.9%
Nursing Facility:								
Skilled Level	65,734,525	2.6%		1,245,704	4.3%	66,980,229	2.6%	2.6%
Intermediate Level	42,938,978	1.7%		1,390,018	4.8%	44,328,996	1.7%	1.7%
Intermediate Care Facility:								
(Mentally Retarded)	382,048,755	14.9%		7,237,850	25.2%	389,286,605	15.0%	16.2%
Dental	21,147,214	0.8%		164,565	0.6%	21,311,780	0.8%	0.8%
Prescription Drugs	497,238,355	19.4%		3,881,378	13.5%	501,119,732	19.3%	19.3%
Home Health	98,734,398	3.9%		1,108,936	3.9%	99,843,334	3.9%	3.7%
CAP/Disabled Adult	52,087,719	2.0%		1,828,824	6.4%	53,916,543	2.1%	2.1%
CAP/Mentally Retarded	242,203,262	9.5%		2,685,624	9.4%	244,888,887	9.5%	9.4%
CAP/Children	19,540,371	0.8%		83,237	0.3%	19,623,607	0.8%	0.7%
Personal Care	47,012,632	1.8%		1,586,511	5.5%	48,599,143	1.9%	1.4%
Hospice	7,886,970	0.3%		71,209	0.2%	7,958,180	0.3%	0.3%
EPSDT (Health Check)	1,295,628	0.1%		6,995	0.0%	1,302,623	0.1%	0.0%
Lab & X-ray	4,389,409	0.2%		40,904	0.1%	4,430,313	0.2%	0.2%
Adult Home Care	45,942,921	1.8%		315,242	1.1%	46,258,163	1.8%	1.8%
High Risk Intervention Residential	11,297,936	0.4%		-	0.0%	11,297,936	0.4%	0.1%
Other Services	36,757,338	1.4%		286,811	1.0%	37,044,148	1.4%	1.4%
Total Services	\$ 2,504,338,347	97.7%	\$	27,405,730	95.5%	2,531,744,077		
Medicare, Part A Premiums	6,961	0.0%		566,293	2.0%	573,254	0.0%	0.0%
Medicare, Part B Premiums	48,172,190	1.9%		646,554	2.3%	48,818,743	1.9%	1.8%
HMO Premiums	9,516,231	0.4%		88,350	0.3%	9,604,581	0.4%	0.8%
Total Premiums	57,695,382	2.3%		1,301,197	4.5%	58,996,578		
Grand Total Services & Premiums	\$ 2,562,033,729	100.0%	\$	28,706,927	100.0%	2,590,740,655		
Medicare Crossovers*	\$ 80,082,319		\$	971,528		\$ 81,053,847		
Number of Disabled/Blind Recipients	220,890			2,335		223,225		
Service Expenditures Per Recipients**	\$ 11,599		\$	12,294		11,606		

Medicare Crossovers are amounts that are billed to Medicare for those Medicaid clients who are also eligible for Medicare.
Service Expenditures Per Recipient does not include adjustments, settlements or administrative costs.

Source: SFY 2002 Program Expenditure Report